LDL apheresis: A therapy option for proteinuria in lupus nephritis?

It may be that LDL apheresis is not only an effective treatment method in patients with a focal segmental glomerulosclerosis but also in persons with other types of nephritis, in particular in cases of nephritis with intraglomerular foam cells. This is indicated by the case of a 28-year-old patient with systemic lupus erythematosus (SLE) reported by scientists working at the Sakurajyuji Hospital in Kumamoto, Japan, in the "American Journal of Kidney Diseases". The patient was referred to the hospital due to a nephrotic-level proteinuria. This occurred although she had been receiving treatment for nearly one year with 50 to 60 mg/d of prednisolone and 100 to 150 mg/d of cyclosporine with methylprednisolone pulse therapy. A kidney biopsy that was conducted after admission to the hospital showed a diffuse global lupus nephritis (World Health Organization class 4-G A/C) with many intraglomerular foam cells containing cholesterol crystals. On the basis of these findings, the attending physicians decided to conduct LCL apheresis therapy. The result: After only 5 apheresis sessions the proteinuria had diminished substantially. The experts are consequently of the opinion that the LDL apheresis treatment seems to be a particularly effective treatment in patients with nephritis with intraglomerular foam cells.

Link to the study: